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**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

 Substitute for Form PTO-1360
 (For use with Form PTO/SB/06)

 Application Number
10/573,111

 Filing Date
23 March, 2006
 To be Mailed
Applicant(s) **LAWES, KEITH TREVOR**

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* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT 02/14/2008		AFTER SEC. AMENDMENT		*		*		*		02/14/2008	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	-	-	-	-	-	-	51	-	-	-	-	-	-	1
2	-	-	-	-	-	-	52	-	-	-	-	-	-	1
3	-	-	-	-	-	-	53	-	-	-	-	-	-	1
4	-	-	-	-	-	-	54	-	1	-	-	-	-	1
5	-	-	-	-	-	-	55	-	-	-	-	-	-	1
6	-	-	-	-	-	-	56	-	-	-	-	-	-	1
7	-	-	-	-	-	-	57	-	-	-	-	-	-	1
8	-	-	-	-	-	-	58	-	-	-	-	-	-	1
9	-	-	-	-	-	-	59	-	-	-	-	-	-	2
10	-	-	-	-	-	-	60	-	-	-	-	-	-	1
11	-	-	-	-	-	-	61	-	-	-	-	-	-	1
12	-	-	-	-	-	-	62	-	-	-	-	-	-	1
13	-	-	-	-	-	-	63	-	-	-	-	-	-	1
14	-	-	-	-	-	-	64	-	-	-	-	-	-	1
15	-	-	-	-	-	-	65	-	-	-	-	-	-	1
16	-	-	-	-	-	-	66	-	-	-	-	-	-	1
17	-	-	-	-	-	-	67	-	-	-	-	-	-	1
18	-	-	-	-	-	-	68	-	-	-	-	-	-	1
19	-	-	-	-	-	-	69	-	-	-	-	-	-	1
20	-	-	-	-	-	-	70	-	-	-	-	-	-	1
21	-	-	-	-	-	-	71	-	-	-	-	-	-	1
22	-	-	-	-	-	-	72	-	-	-	-	-	-	1
23	-	-	-	-	-	-	73	-	-	-	-	-	-	1
24	-	-	-	-	-	-	74	-	-	-	-	-	-	1
25	-	-	-	-	-	-	75	-	-	-	-	-	-	1
26	-	-	-	-	-	-	76	-	-	-	-	-	-	1
27	-	-	-	-	-	-	77	-	-	-	-	-	-	1
28	-	-	-	-	-	-	78	-	-	-	-	-	-	1
29	-	-	-	-	-	-	79	-	-	-	-	-	-	1
30	-	-	-	-	-	-	80	-	-	-	-	-	-	1
31	-	-	-	-	-	-	81	-	-	-	-	-	-	2
32	-	-	-	-	-	-	82	-	-	-	-	-	-	1
33	-	-	-	-	-	-	83	-	-	-	-	-	-	1
34	-	-	-	-	-	-	84	-	-	-	-	-	-	1
35	-	-	-	-	-	-	85	-	-	-	-	-	-	1
36	-	-	-	-	-	-	86	-	-	-	-	-	-	1
37	-	-	-	-	-	-	87	-	-	-	-	-	-	1
38	-	-	-	-	-	-	88	-	-	-	-	-	-	1
39	-	-	-	-	-	-	89	-	-	-	-	-	-	2
40	-	-	-	-	-	-	90	-	-	-	-	-	-	1
41	-	-	-	-	-	-	91	-	-	-	-	-	-	1
42	-	-	-	-	-	-	92	-	-	-	-	-	-	1
43	-	-	-	-	-	-	93	-	-	-	-	-	-	1
44	-	-	-	-	-	-	94	-	-	-	-	-	-	1
45	-	-	-	-	-	-	95	-	-	-	-	-	-	1
46	-	-	-	-	-	-	96	-	-	-	-	-	-	2
47	-	-	-	-	-	-	97	-	-	-	-	-	-	1
48	-	-	-	-	-	-	98	-	-	-	-	-	-	1
49	-	-	-	-	-	-	99	-	-	-	-	-	-	2
50	-	-	-	-	-	-	100	-	-	-	-	-	-	1
Total Indep							Total Indep							
Total Depend							Total Depend							
Total Claims							Total Claims							

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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